

ETHNIC HEALTH ADVISORY COMMITTEE

January 16, 2007 5:00 – 7:00 PM Cannon Health Building Room 114

	Committee	UDOH Liaisons	Committee Staff	Guests
Members	Aida Santos Mattingley Betty Sawyer Dena Ned Doriena Lee Ellen Selu Heru Hendarto Jesse Soriano K. Kumar Shah Kyum Koo Chon Luz Robles Robert Kagabo Sabrina Morales Sam Folau Shawn M. Jimerson Suri Suddhiphayak Sylvia Garcia Rickard	Patti Fuhriman Elizabeth Heath Walt Torres Nasrin Zandkarimi Melissa Zito Kathryn Rowley	George Delavan Owen Quiñonez Matt Montoya Janae Duncan	
Excused	Sam Folau Aida Santos Mattingley Betty Sawyer Ellen Selu Suri Suddhiphayak Leanna Vankeuren		George Delavan	
Attendees:	Doriena Lee Jesse Soriano K. Kumar Shah Luz Robles Robert Kagabo Sabrina Morales Shawn M. Jimerson Sylvia Garcia Rickard	Patti Fuhriman Walt Torres	Owen Quiñonez Matt Montoya Janae Duncan	Judi Hilman, UT Health Policy Project/MHN Juan Carlos Carerra, MHN Coordinator Rebecca Jorgensen, UDOH Asthma Program. Mary Catherine Jones, DCFS

Agenda topics

1. Call to order, welcome, introduction Sylvia Rickard

Discussion:

The meeting was called to order at 5:20 p.m. by Sylvia Rickard who welcomed and introduced everyone.

Conclusions: None

Action items: None Person responsible: Deadline:

None None

2. Review / approval of November 13, 2006 minutes Sylvia Rickard

Discussion:

Changes: Pg. 6—change "Jesse will take over..." to "Jesse will be lead on health issues for the Office of Ethnic Affairs."

Motion: Kumar motioned to accept minutes with change to page 6 Luz seconded

Conclusions: Motion passed

Action items:	Person responsible:	Deadline:
Make changes to November 13, 2006 minutes brought before committee and send to members	Matt Montoya	2 wks before next meeting

3. Multicultural Health Network Sabrina Morales
Judi Hilman
Juan Carlos Carerra

Discussion:

Sabrina clarified that Juan Carlos Carerra (JCC) will give presentation(s)/update(s) from here-on-out.

Kumar suggested that Sabrina discuss: 1. ground rules for grant selection process, 2. Performance measures to be used and 3. Provide status reports

Sabrina stated that it was her understanding that this would be a status report on progress made thus far. JCC will be coordinating the MHN.

There have been 3 meetings of the MHN already.

Sabrina handed-out a matrix of workgroup priorities; clarified that CMH and others involved in MHN meeting are already aware of this information.

From years past there was concern that there was no follow-up on recommendations from the Health Disparities Summits. MHN will now bring in private and public sector representatives who can prioritize and implement the recommendations. Sabrina feels that the priorities are still the same from years past; however, there has not been much implementation. Sabrina explained the matrix.

Sabrina stated that there may be some key players and resources that are not on the matrix. Sabrina, Judi and Juan are

inviting these people to join MHN and working on expanding resources.

Judi wants the private sector to be a bit more involved in the data collection process.

Kumar clarified that the legal question relating to data collection process is something that has always come-up; he asked: "Are you going to look into how MA and CO have overcome this problem so that standardization can be implemented?" And suggested to have an agreement in place to overcome the legal barriers. Kumar continued by saying that, other than that the UDOH has a great data collection system.

Luz: pointed out that Utah is one of the few states that doesn't collect data through hospitals; Suggested that Utah institutionalize what the Federal Association of Hospitals has done and enforce data collection through legislation; Utah Hospital Association is open to dialogue on this; It was pointed out that UDOH employs surveys as data collection mechanism; the best practice should be to collect reliable data.

Jesse commented that in discussion with the UUH&C the legal question is the most pressing issue because we cannot force patients to provide information; we can legislate that the hospitals ask for data but not legislate that patients provide Syliva asked what the NHELP is and HRET: answer—National Health Legal Program (NHelp) and Health Research and Educational Trust (HRET)

Sabrina continued by outlining that the workgroups will decide which priority area(s) they will work on within their workgroup; workgroups will be meeting this next month.

Rep. Jenifer Seelig is sponsoring legislation to improve access by offering minigrants to CBOs to improve enrollment process and outreach.

Luz clarified that per the legislation fiscal-note operator will the OEA because it goes beyond health; those serving underserved communities; outreaching in a culturally competent manner.

Doriena expressed a concern about outreach bringing up that Molina healthcare never responded to her request to send a representative to talk to her group;

Patti suggested that she may be able to help Doriena find the appropriate people to talk to so that her group can get the resources they need.

Sylvia recommended that Patti be a resource for the access group; Patti said that she will definitely facilitate any requests. Next steps for MHN workgroups will be:

- 1. Conducting committee meetings
- 2. Setting goals
- 3. Prioritizing goals
- 4. Determining what some of the implementation steps will be
- 5. Identifying who key players are

Owen asked how Sabrina sees EHAC working with the MHN. Owen suggested that through the "Connection" newsletter we can announce meetings, highlight success etc.

In order to prevent duplication of services Sabrina hopes that EHAC members will participate in MHN workgroups. Kumar asked what the deliverables are. Are they long-term? He said there needs to be subsets to track progress.

Sabrina appreciates the level on interest coming from EHAC into the MHN and what it is doing so far.

Jesse asked that when using acronyms (in general documents and the matrix presented) please put what they are.

Kumar suggested that MHN consider attaching a glossary of acronyms.

If you would like to contact Juan Carlos Carrera his e-mail is: carreras@cuutah.org

Conclusions:

Next steps for MHN workgroups will be:

- 1. Conducting committee meetings
- 2. Setting goals
- 3. Prioritizing goals
- 4. Determining what some of the implementation steps will be
- 5. Identifying who key players are

Recommendations:

If anyone is aware of proceedings from previous summits, especially in workgroups, make them known to Juan Carlos. EHAC members should join a MHN workgroup.

Action items:	Person responsible:	Deadline:
Look into how MA & CO have overcome data collection legal problems	MHN	None
Bring to light the following: 1. ground rules for grant selection; 2. performance measures; and 3. status reports	MHN/CMH	None
Provide meaning of acronyms used	MHN	None

4. EHAC Retreat Sylvia Rickard

Discussion:

Sylvia introduced the idea of having a retreat. Originally EHAC leadership wanted to have our retreat on March 12 but Kumar will be unavailable. Sylvia stressed the importance of having all members present. Option 1: have it on the 12th; Option 2: have it on March 5; Option 3: have it in May.

Shawn suggested that we have it in March so that if there is business left-over we can finish in May.

Luz suggested to send out an e-mail.

Matt suggested that we make a phone call. Sylvia offered to help with phone calls. We will send out an e-mail noting that Sylvia will call if there is no response.

The suggestion was made to have it on a Saturday and separate from the general meeting.

We will have our regularly scheduled meeting and through-out some dates.

We can do the planning on the regular meeting on the March meeting. And have the retreat early April.

Sylvia clarified that if member have any agenda items we can e-mail them.

Conclusions:

EHAC retreat will be held separately on a Saturday sometime in March/April

Action items: Send out e-mail soliciting suggestions form EHAC members	Person responsible: Matt Montoya	Deadline: Before next meeting
Call those members who do not respond via e-mail	Sylvia Rickard	
Coordinate the logistics of the retreat	СМН	

5. UDOH Asthma Program follow-up

Rebecca Jorgensen

Discussion:

Rebecca handed out copies of the Asthma State Plan. The first part of the plan is a discussion of the program and what they have accomplished so far. Rebecca also explained the four goal areas of plan and what they oversee (please see plan). The plan was outlined by the Utah Asthma Task Force. The Asthma Program wanted to give follow-up with last meeting and utilize the opportunity to present the revised plan. The Asthma program wants to make it a priority that the plan's objectives will meet the needs of all the ethnic groups. Rebecca requested EHAC feedback by requesting that 3-5 members of the committee review the plan to make sure that this is culturally competent. Janae and Dulce from CMH are on the Utah Asthma Task Force and are already reviewing the plan, however the Asthma Program also wants some representatives from EHAC to also review the plan.

Kumar asked if they will accommodate the fact that EHAC members may work full-time.

Rebecca stated that they can take the plan, review it at home and e-mail feedback.

Robert, Shawn, Sylvia, Kumar, Walt and MHN staff will review the Asthma State Plan.

If individuals or agencies wish to provide a letter of support that is optional.

Rebecca will send out an electronic copy of the plan to those who volunteered.

February 1st is the deadline for feedback.

Conclusions:

Review the Asthma State Plan and provide feedback	Person responsible: Robert, Shawn, Sylvia, Kumar and Walt, MHN	Deadline: February 1, 2007

6. UDOH/CMH Update

Owen Quiñonez

Discussion:

UDOH: the Governors budget recommendations included: see Owen.

CMH: announced the progress is being made on the Qualitative Status Report; final draft will be available August 2007; timeline of research. 1997 was the last report with recommendation. Seven programs are participating in this report. How feasible will the implementation of these recommendations be? We want the communities to know that we hear them. CMH cultural competence project: working with four groups—conducted training for participants in December and January.

Sabrina asked for a copy of the presentations. Sabrina asked if the team comes-up with the curriculum; Owen clarified that the participant groups come up with their own plans to implement cultural competency.

Kumar clarified who comes-up with the guidelines. Is there a check-list? Answer: NO.

When we say CC we may be referring to CLAS. Identifying strategies then.

Sabrina suggested that we have the evaluator/facilitator present to EHAC.

Owen: Each plan is customized to each program. We will arrange for someone to come and present on this project for the March meeting.

Sabrina asked Owen to clarify the role of Alliance Community Services (ACS) in the Hispanic Health Care Task Force (HHCTF). CMH recognizes Sabrina's concerns but, feels that MHN and HHCTF will not be duplicating services. Sylvia clarified that ACS does not run the HHCTF.

Representatives from MHN and HHCTF have agreed to attend each other's meetings to improve coordination and collaboration.

Announced that CMH was awarded State Innovation Award; working with HealthInsight to evaluate CLAS standards for clinics who receive funding for Medicaid patients. Send e-mail to evaluation instrument used.

Sylvia commended the work that CMH is doing.

Conclusions:		
Recommendations: Have CC Project evaluator/facilitator present to EHAC		
Action items:	Person responsible:	Deadline:
Send-out e-mail to solicit membership for the new sub-committees	Matt Montoya	2 weeks before next meeting
7. Announcements	All	

Discussion:

> Utah Leadership Forum summary available.

Conclusion	ns: None		
Action items: Obtain copies of report or photocopy		Person responsible: Matt Montoya	Deadline: Prior to next meeting
8.	Adjourn and next meeting	Sylvia	Rickard
	ljourned at 6:40 pm as: Next meeting March 12, 2006		
Action item		Person responsible:	Deadline: